	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 302 / 846 (check only one)    X
	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  NATIONAL REPUBLICAN CONGRESS	name and add	ts may not be sold or used by any person for the purpose of soliciting contributions and address of any political committee to solicit contributions from such committee.	
∠ <b>A</b> .	Full Name (Last, First, Middle Initial) MR. BENJAMIN LEON, JR. Mailing Address 630 LEUCADENDRA DRIVE			Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City CORAL GABLES FEC ID number of contributing	State Zip Code FL 33156-2332  C  Occupation PRESIDENT & CEO  Aggregate Year-to-Date		Transaction ID: SA11.14287783  Amount of Each Receipt this Period  20000.00  CONTRIBUTION
	Name of Employer LEON MEDICAL CENTERS, INC.  Receipt For: Primary General			
- 3.	Other (specify)   Full Name (Last, First, Middle Initial) SIDNEY M. LERMAN  Mailing Address 31 EVERGREEN CIR.			Date of Receipt
	City  MANHASSET  FEC ID number of contributing federal political committee.	State NY	Zip Code 11030-3934	Transaction ID: SA11.14273620  Amount of Each Receipt this Period  250.00
	Name of Employer WEEKS-LERMAN GROUP LLC  Receipt For:  Primary General Other (specify) ▼	Occupation EXECUT Aggregate		CONTRIBUTION
- ).	Full Name (Last, First, Middle Initial)  MRS. CATHY A. LESHER  Mailing Address 4485 RAVENNA AVE SE			Date of Receipt
	City EAST CANTON	State	Zip Code 44730-9730	Transaction ID: SA11.14283729  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1 1 1 1 1	250.00
	Name of Employer D & K SUPPLY AND EQUIPMENT INC. Receipt For: Primary General Other (specify) ▼	-1	n MANAGER e Year-to-Date ▼ 550.00	CONTRIBUTION
	SUBTOTAL of Receipts This Page (optional)			20500.00
	TOTAL This Period (last page this line number of	only)	<b>&gt;</b>	